

# Unseen Complications: The Impact of Surgery on Mental Health

By Morrow Dowdle, PA-C

There's no denying that surgery has become a commonplace part of our lives. In the U.S., a person will undergo an average of 9.2 surgical procedures during his or her lifetime. These numbers are likely to grow as we continue to see advancements in surgical technology and safety. But although our society has become more comfortable with surgery as a routine part of lifetime medical care, there is a subject that I think we are still not entirely comfortable discussing: the impact of mental health on surgery, and vice versa.

A 2016 study in *The Journal of Urology* showed that patients with poorer mental health prior to bladder removal surgery had more postoperative complications. Higher levels of stress can impair the immune response, causing delayed wound healing and difficulty fighting off infection. I would add that mental health symptoms themselves can pose their own challenges. Patients with major depression, for example, may experience decreased interest in activities, slowed physical activity, loss of energy, and difficulty concentrating. Any of these could impede a patient from attending regular follow-up appointments with their surgeon or specialist, adhering to physical therapy routines, or using pain medications properly.

Two studies presented at the 2012 Annual Meeting of the American Academy of Orthopaedic Surgeons cited patients' mental health status as an important factor for achieving the best outcomes after surgery. One study showed that women with anxiety disorders had higher postoperative pain and longer hospital stays following total knee replacement. The other study showed that patients with depression were more likely to report greater pain before and after total hip replacement and have less overall satisfaction with the procedure.

Joint replacement surgeries can be life-changing for many patients, but they are also generally elective procedures that may not



always be necessary, especially if the patient's expectations for mobility are low. Patients with mental illness may not have the social support, motivation, and energy necessary for what can be a physically grueling recovery. The risks of chronic pain and worse debilitation may outweigh the benefits that such procedures may provide.

Bariatric (weight loss) surgery is one area that has been leading the way in terms of monitoring the interaction between patients' mental health and surgical outcomes. According to a 2016 study in the *Journal of the American Medical Association*, 23 percent of patients seeking bariatric surgery have a current mood disorder; the incidence of depression is twice as common as in the general population. The good news is that patients who successfully undergo these procedures tend to have long-term mood improvement.

Mental health screening is currently standard prior to bariatric surgery, and can help identify whether a patient is

psychologically stable enough to manage the rigorous postoperative self-care and lifestyle modifications. However, in addition to such screening, patients may require specific counseling and support following their procedures. Because metabolism and gastrointestinal absorption can change drastically after bariatric surgery, the dosage, frequency, and even type of medication these patients take for mental illness may need to be adjusted.

There are, of course, many other areas in which mental health and surgery intersect, including worsening of current mental illness, the onset of post-traumatic stress disorder, and pain medication abuse and dependence following surgical procedures. As the call for reforms to the U.S. medical system continues, hopefully psychological evaluation can become a routine part of patients' pre- as well as postoperative care, whether it is as simple as a patient-guided survey or as involved as a direct collaboration between surgeons and mental health specialists. Mental wellness is, without a doubt, essential to ensuring a patient's successful recovery after surgery. ❧❧

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